

Case Docket No. CFS.004CP1 Date: December 2, 2003

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Applicants** 

Swaim, et al.

Appl. No.

10/712,388

Filed

November 12, 2003

For

**ENTERTAINMENT SYSTEM** COMPRISING SUSPENSION

**PLATFORM** 

Examiner

Unknown

Group Art Unit:

Unknown

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

Degember 2, 2003

Irfan A. Lateef, Reg.

## TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## Dear Sir:

Enclosed for filing in the above-identified application are:

- (X) A Supplemental Information Disclosure Statement.
- (X) A PTO Form 1449 with one (1) reference.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 11-1410.
- Return prepaid postcard. (X)

Registration No. 51,922

Attorney of Record

Customer No. 20,995

(949) 760-0404

DEC 0 8 2003

## SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

**Applicants** 

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Unknown

Group Art Unit

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Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Enclosed is form PTO-1449 listing one (1) reference that is also enclosed.

This Supplemental Information Disclosure Statement is being filed within three months of the filing date of this application and no fee is required in accordance with 37 C.F.R. & 1.97(b)(1), (b)(2), or (b)(4).

Respectfully submitted,

KNOBBE, MARTENS, OLSON & BEAR, LLP

Dated: 2 - Dec. 2003

Irfan A. Lateef

Registration No. 51,922

Attorney of Record

Customer No. 20,995

(949) 760-0404

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U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE

ATTY. DOCKET NO. CFS.004CP1 APPLICATION NO. 10/712,388

MATION DISCLOSURE STATEMENT BY APPLICANT

APPLICANT Swaim, et al.

(USE SEVERAL SHEETS IF NECESSARY)

FILING DATE GROUP
November 12, 2003 Unknown

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				U.S. PATENT DOCUMENTS				
EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE (IF APPROPRIATE)	
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EXAMINER	DATE CONSIDERED

\*EXAMINER: INITIAL IF CITATION CONSIDERED, WHETHER OR NOT CITATION IS IN CONFORMANCE WITH MPEP 609; DRAW LINE THROUGH CITATION IF NOT IN CONFORMANCE AND NOT CONSIDERED, INCLUDE COPY OF THIS FORM WITH NEXT COMMUNICATION TO APPLICANT.